

PLACE OF BIRTH

1. County of Gila

District of _____

Town of Miami

or

City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 112County Registrar No. 41

Local Registrar No. _____

No. Smith Jell St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Rudger Irwin Adams { If child is not yet named, make supplemental report, as directed.3. Sex of Child male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 5. No., in order of birth _____ 6. Legitimate? yes 7. Date of birth Feb 4 1927
Month Day Year8. FATHER Full name George Rudger Adams 14. MOTHER Full maiden name Ruby May Hancock9. Residence (Usual place of abode) Miami Arizona 15. Residence (Usual place of abode) Miami Arizona
If non-resident, give place and state.10. Color or race White 11. Age at last birthday 23 (Years) 16. Color or race White 17. Age at last birthday 21 (Years)12. Birthplace (city or place) Central Arizona 18. Birthplace (city or place) Eden Arizona
(State or country)13. Occupation Miner 19. Occupation Housewife
Nature of industry Copper Nature of industry20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 3:45 P. m. on the date above stated
(Born alive or stillborn.)* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth. Signature J. J. Tronilla (Physician or midwife)
Address Miami, ArizonaGiven name added from a supplemental report. Month, day, year Feb 11, 1927 Filed P. E. Iron Local Registrar.

Registrar

Filed _____, 19____ County Registrar.

912-204-982

order of birth stated.